

| POSITION                  | INITIALS  | ID NO. | DATE     |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION         | <i>AK</i> |        | 11 29-01 |
| O.I.P.E. CLASSIFIER       |           |        |          |
| FORMALITY REVIEW          | <i>AK</i> | 901    | 12/28/01 |
| RESPONSE FORMALITY REVIEW |           |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date     |
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| Final Original |          |
| 1              | 10/10/03 |
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| Claim          | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
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